

USPTO
RECEIPT

2010 FEB 25 AM 11:34

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

KONIECZNA et al.

Serial No. 10/564,148

Filed: November 9, 2006

FOR: PHARMACEUTICAL FORMULATION COMPRISING LEVOTHYROXINE
SODIUM

Confirmation No. 6122

Atty. Ref.: 37-86

T.C. / Art Unit: 1618

Examiner: J.M. Vu

* * *

REFUND REQUEST

February 24, 2010

Mail Stop 16 - Refund

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

A refund is respectfully requested for an incorrect charge to our deposit account for an Information Disclosure Statement (IDS). No IDS was submitted with the response filed January 22, 2010. And the fees for an RCE and a one-month extension of time were already paid. Therefore, it is requested that the incorrect charge be refunded to Applicants' undersigned attorney by crediting \$180 to our Deposit Account No. 14-1140 under Order No. 37-86.

Respectfully submitted,

NIXON & VANDERHYE P.C.

By: /Gary Tanigawa/

Gary R. Tanigawa

Reg. No. 43,180

901 North Glebe Road, 11th Floor

Arlington, VA 22203-1808

Telephone: (703) 816-4000

Facsimile: (703) 816-4100

1597343

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Atty GRT/37-86
Dkt.

IAPO3Rec'd PGT 27 JAN 2010

C# M#

KONIECZNA et al.

T.C./Art Unit: 1618

Serial No. 10/564,148

Examiner: J.M. Vu

Filed: November 9, 2006

Date: January 22, 2010

Title: PHARMACEUTICAL FORMULATION COMPRISING LEVOTHYROXINE
SODIUMCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment 31 minus highest number
previously paid for 20 (at least 20) = 11 x \$52.00 \$572.00 (1202)/\$286.00 (2202) \$ 572.00

Independent claims after amendment 3 minus highest number
previously paid for 3 (at least 3) = 0 x \$220.00 \$0.00 (1201)/\$0.00 (2201) \$ 0.00

If proper multiple dependent claims now added for first time, (ignore improper); add
\$390.00 (1203)/\$195.00 (2203) \$ 0.00

Petition is hereby made to extend the current due date so as to cover the filing date of this
paper and attachment(s)

One Month Extension \$130.00 (1251)/\$65.00 (2251)
Two Month Extensions \$490.00 (1252)/\$245.00 (2252)
Three Month Extensions \$1110.00 (1253)/\$555.00 (2253)
Four Month Extensions \$1730.00 (1254)/\$865.00 (2254)
Five Month Extensions \$2350.00 (1255)/\$1175.00 (2255) \$ 65.00
\$140.00 (1814)/ \$70.00 (2814) \$ 0.00

Terminal disclaimer enclosed, add

☐ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) \$ 180.00

Assignment Recording Fee \$40.00 (8021) \$ 0.00

Other: \$ 0.00

TOTAL FEE \$ 245.00☒ **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor
Arlington, Virginia 22203-1808
Telephone: (703) 816-4000
Facsimile: (703) 816-4100
GRT:ap

NIXON & VANDERHYTE P.C.

By Atty: Gary R. Tanigawa, Reg. No. 43,180

Signature: 

01/27/2010 LLANDGRA 00000033 141140 10564148

01 FC:1615 572.00 OP
02 FC:1251 130.00 OP
03 FC:1806 180.00 DA

Adjustment date: 03/03/2010 SDIRETAT
01/27/2010 LLANDGRA 00000033 141140 10564148
03 FC:1806 180.00 CR

1582517